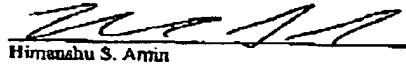


PATENT

MS163086.1

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being faxed to 703-872-9306 on the date shown below to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Date: 6-9-04


Hiranandu S. Amin

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OFFICIAL**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re patent application of:

Applicant(s): Dennis A. Morgan, *et al.*

Examiner: Marc M. Duncan

Serial No: 09/769,199

Art Unit: 2184

Filing Date: January 24, 2001

Title: CONSUMER NETWORK DIAGNOSTIC AGENT

Mail Stop Non-Fee Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

REPLY TO OFFICE ACTION DATED DECEMBER 10, 2003

Dear Sir:

Favorable consideration of the above-identified patent application is respectfully requested in view of the amendments and comments below.

The Commissioner is authorized to charge the fee for a three-month extension of time (\$950.00) to Deposit Account No. 50-1063 (Ref. No. MS163086.1).